								10/601785					
•	á in			3	1.		٧.				cket Num	ber	
PATENT APPLICATION FEE DETERMINATION RECORD  Effective January 1, 2003  MS1-1459US													
CLAIMS AS FILED - PART I (Column 1) (Column 2)									IIIIY	OR	OTHER SMALL		
TOTAL CLAIMS			d	•			Ė	RATE	FEE	Ì	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		B/	SIC FEE	375.00	OR	BASIC FEE	750.00	
TOTAL CHARGEABLE CLAIMS			minus 20=		· 34			X\$ 9=		OR	X\$18=	612	
INDEPENDENT CLAIMS			& mir	nus 3 =	' 9	<u> </u>		X42=		OR	X84=	420	
MULTIPLE DEPENDENT CLAIM P			RESENT	<u> </u>				+140 <b>=</b>		OR	+280=		
* If the difference in column 1 is less than zero, enter "0" in column 2							<u></u>	OTAL		OR	TOTAL	1782	
CLAIMS AS AMENDED - PART II OTHER THAN													
竹	1 /0/	(Column 1) CLAIMS		(Colur		(Column 3)	֓֞֝֟֝֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֡֓֓֓֓֓֓֡֓֓֡֓֡֓֡	MALL	ADDI-	OR I	SMALL	ADDL⁄	
AMENDMENT A		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	DUSLY	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL	
	Total	. 4	Migras	7-1		-/		X\$ 9=		OR	X\$18=		
	Independent	NTATION OF MU	Midus /	ENDEN	T CL AIM	<del>-</del>		X42=		OŖ	X84=		
با	FIRST PRESE	NIATION OF IM	DETIPLE DEF	CINDEIA	CLAIN	<b>- L-1</b>	١,	+140=		OR	≠280=		
							<b>-</b>	TOTAL DIT. FEE		OR	TOTAL ADDIT, FEE		
		(Column 1)		(Colu	mn 2)	(Column 3)	_	O11. 1 CC			70011.11 CE		
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	• 50	Minus	<del>4</del> 5	4	= ./		X\$ 9=		OR	X\$18=	<b>/</b> /	
	Independent	* 7	Minus	***	S FCI AIM	]=/0		X42=		OR	X84=	X	
_	TINOT PILESE	INTERIOR OF INC	·	CHOCK	. 00 4.11	<del></del>	<b>,</b> [	+140=		OR	+280=		
						•	AD	TOTAL DIT. FEE	·	OR	TOTAL ADDIT, FEE		
(Column 1) (Column 2) (Column 3)													
ပ		CLAIMS REMAINING			HEST MBER	PRESENT	$\Gamma$		ADDI-	1	<u> </u>	ADDI-	
AMENDMENT C		AFTER AMENDMENT			FOR	EXTRA		RATE	TIONAL FEE		RATE	TIONAL	
	Total	•	Minus	**		•	$\prod$	X\$ 9=		OR	X\$18=		
	Independent	•	Minus	***		<u> </u>	$\downarrow \Gamma$	X42=		OR	X84=		
L	FIRST PRESE	NTATION OF M	ULTIPLE DEI	PENDEN	r CLAIM		┙┞	+140=		OR	+280=		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.													
***	"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ADDIT. FEE  ADDIT. FEE  ADDIT. FEE  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												
	i ne "Highest Nun	nper Previously Pa	io For (Total o	r Independ	deut) is thi	e uiguesi urimp	er round	n ne et	propriate bo	x ID C	JUTAN 1.		

FORM PTO-875 (Rev. 12/02)

\*U.S. Government Printing Office: 2003 - 498-278/99151

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